

Civil Traffic Infraction Hearing Officer Grant-in-Aid

County/Circuit: _____

Amount of Award: \$ _____ Grant, FY 2003-04

Total Budget: \$ _____ (Grant plus Match)

Spending Plan

Category	Grant-in-aid	County Cash Match	County In-Kind Match	Sub-Totals
PERSONNEL				
FULL TIME EQUIVALENT (FTE)				
SUB-TOTAL PERSONNEL				
OTHER PERSONNEL SERVICES				
CONTRACTUAL AGREEMENTS	\$5,800	\$5,800		\$11,600
SUB-TOTAL OPS/CONTRACTUAL/SVC				
EXPENSE				
Travel	\$ 600	\$ 600		\$ 1,200
Training	\$ 600	\$ 600		\$ 1,200
SUB-TOTAL EXPENSES				
OTHER CAPITAL OUTLAY (OCO)				
SUB-TOTAL OCO				
FIXED CAPITAL OUTLAY				
SUB-TOTAL FIXED CAPITAL OUTLAY				
GRAND TOTAL				

Please sign below:

CHIEF JUDGE _____
Charles A. Francis

DATE _____

CHAIR, BOARD OF COUNTY
COMMISSIONERS _____
Tony Grippa

DATE _____

Civil Traffic Infraction Hearing Officer Program
Grant-in-Aid Release Request

ATTN: Donna Brewer
Grants Administrator
Office of the State Courts Administrator
Florida Supreme Court Building
500 South Duval Street
Tallahassee, Florida 32399-1900

Dear Donna:

In accordance with the Grant-in-Aid Agreement executed with Leon County, the 2nd Judicial Circuit, and the Office of the State Courts Administrator, I hereby request the release of \$ 7,000 as specified in the Agreement for fiscal year 2003-04. The amount is equal to the total grant-in-aid to the county.

Please make check payable to Leon County Board of County Commissioners

At the address of 301 So. Monroe St, Suite 315, Tallahassee, FL 32301

Sincerely,

Chair, Board of County Commissioners
Tony Grippa